	PATER	IT APPLICATION FO	F DETERMIN	TION RECORD	MEST & GENERAL BEST	NT OF COMERCE
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CO De Comment	CALL THE PERSON NAMED IN COLUMN	too the extended and	O.L. 177 and 27 CFR	1 M This and a state of the public	& which is to the free L	in .
ADDRESS, SE	WD TO: Commission of	Committee, P.O. Box 1440	the for contacting (Ats &		chicket case, Acy compe	FC,
•		Commerce, P.O. Box 1450, A	12343-4 12343-4	CO NOT SEND FEES OR CO	SPLETED FORMS TO THE	eri ec
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If you need auditance in completing the farm, call 1-800-PTO-8124 and acted option 2

2012

Application/or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 **CLAIMS AS FILED - PART I** SMALL ENTITY OTHER THAN (Column 2) (Column 1) TYPE SMALL ENTITY **TOTAL CLAIMS** RATE FEE RATE FEE OR BASIC FEE FOR 370.00 BASIC FEE 740.00 **NUMBER EXTRA** NUMBER FILED TOTAL CHARGEABLE CLAIMS minus 20= X\$18= X\$ 9= 270 OR 3 INDEPENDENT CLAIMS minus 3 = X42= X84= OR MULTIPLE DEPENDENT CLAIM PRESENT +280= +140= OR * If the difference in column 1 is less than perol enter 0" in column 2 TOTAL TOTAL OR 1262 OTHER THAN SMALL ENTITY SMALL ENTITY OR (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-**AMENDMENT A** REMAINING NUMBER **PRESENT** TIONAL TIONAL RATE RATE **PREVIOUSLY** AFTER **EXTRA** FEE FEE **AMENDMENT** PAID FOR Total Minus X\$ 9= OR Independent Minus X42=OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= For 7 Indep Claims +140= TOTAL (Column 3) (Column 1) (Column 2) HIGHEST CLAIMS ADDI-ADDI-AENDMENT B REMAINING NUMBER PRESENT TIONAL TIONAL RATE RATE AFTER: **PREVIOUSLY** EXTRA PAID FOR FEE FEE **AMENDMENT** Total Minus X\$ 9= X\$18= OR Independent Minus X84= X42= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 2) (Column 3) (Column 1) CLAIMS HIGHEST ADDI-O ADDI-REMAINING NUMBER PRESENT AMENDMENT RATE TIONAL TIONAL AFTER PATE PREVIOUSLY **EXTRA** AMENDMENT PAID FOR FEE FEE. Minus Total ··· ** X\$18= X\$ 9= OR Minus. Independent *** X42 =X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL OR ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT, FEE

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."